

## **WHITE HOUSE CONFERENCE ON AGING POST-EVENT SUMMARY REPORT**

### **WHITE HOUSE CONFERENCE ON AGING AGENDA AREA: Health and Long Term Living**

**Name of Event:** Medicare/Medicaid: State and National Advocates Respond to Recent and Proposed Changes

**Date of the Event:** 03/03/2005

**Location of the Event:** Rubloff Auditorium, Loyola University Chicago School of Law, 25 E. Pearson, Chicago

**Number of Persons Attending:** 100

**Sponsoring Organizations:** The Task Force on Issues Affecting Women as They Age of The Chicago Bar Association and Women's Bar Association of Illinois

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### **EVENT SUMMARY:**

This event was held at the Loyola University of Chicago School of Law auditorium. Attendees numbered over 100 and included professors, lawyers, students, elder rights advocates, gerontologists, aging network providers and administrators, retirees, and State and Federal employees. The seminar featured a panel of speakers representing some facets of the current debate over recent and proposed changes in the Medicare program.

Ms. Liz Cepero, an Outreach and Health Insurance Specialist for the Department of Health and Human Services at the Centers for Medicare and Medicare Services (CMS) provided an overview of the Medicare Modernization Act and its benefits. Ms. Judith Stein, founder of the Center for Medicare Advocacy in Maine, offered observations on the impact of the changes on low income persons who often need representation in securing their benefits. Ms. Jan Witt of the National Committee to Preserve Social Security and Medicare provided an analysis of the privatization features of the prescription drug benefit and finally, Dr. Quentin D. Young, founder of the Chicago based Health & Medicine Policy Research Group, offered an alternative single payer, National Health Insurance Program.

The panel presentations were followed by open discussion. Following the general session, the Task Force members convened to review the material presented, discuss it with several of the panelists and formulate a priority area for the 2005 White House Conference on Aging.

## **PROBLEM STATEMENT**

The positive impact of the Medicare program since its enactment in 1965 on older persons is undeniable, especially in its documented reduction of poverty among the elderly and guaranteed access to quality, affordable health care while still preserving beneficiary choice of care providers. It was founded on the core principle of universal access and access to basic benefits across the nation for all eligible persons. The Medicare program was ingeniously coupled with the Social Security System to assure near universal program enrollment. The Medicare Modernization Act will begin to erode this basic structure with a fragmented, complex and partially privatized program that is not in the best interest of beneficiaries who may lose benefits that were previously available. Furthermore, the new changes create a complex and intimidating 5-stage appeal process with review criteria dependent on the design of each different plan, making it less accessible to beneficiaries and their advocates. The loss of commitment to an open and equitable program will hurt the most economically vulnerable persons enrolled and will ultimately cost the taxpayers greatly as we move from a system driven by medical professionals to a system driven by rules and the profit of private insurers.

## **PRIORITY ISSUE #1**

The Medicare Modernization Act (MMA) was passed in haste without prior public debate of its provisions, the impact on beneficiaries, and the cost to taxpayers. There are significant concerns regarding the Act; consequently, the experiences during the first year after enactment should be carefully monitored to determine if the Act has met the needs of those who use the system, particularly those participants who are dual eligible or in the past were Medicaid eligible.

### **Barriers:**

- The issue of adequate health care for all citizens in America has become so highly politicized that we fail to acknowledge that all Americans support the same value: quality health care at an affordable price.
- The current administration views the passage of MMA as a political victory, thereby diminishing chances for any objective assessment of implementation problems and flaws in the initial design.

**Solutions:**

- A special session on the MMA should be held at the 2005 WHCoA with proponents and opponents available to discuss all aspects of this law.
- The 2005 WHCoA should put to the vote the establishment of a national non-/bi-partisan Blue Ribbon Commission to study the MMA, its implementation and impact, and provide recommendations for revision, which may not exclude movement toward a single payer national health care system. The composition/appointment of this Commission should mirror the original provisions for the Federal Council on the Aging as first provided for by the 1973 Amendments to the Older Americans Act but removed in the 2000 reauthorization.

**PRIORITY ISSUE #2**

It is essential (1) that current beneficiaries and future recipients are made fully aware of the nature of the changes to Medicare, and the positive and negative impact of such changes, and (2) that open dialog on further revisions and changes is encouraged.

**Barriers:**

- No one can explain the new program clearly and concisely in 15 minutes. It is complex, has various phase-in dates, enrollment periods, plan election windows and penalty dates. Benefits and covered drugs will vary among providers of the drug benefit. The prohibition against CMS negotiating drug prices with pharmaceutical companies will impact costs.
- The issue of adequate health care for Americans is dominated by partisan politics.

**Solutions:**

- Support CMS in its public education efforts while cautioning officials not to oversell the benefits of this program, which will only lead to recipient disappointment and frustration.
- Maintain open and objective communication on the implementation of MMA among all administrative agencies involved and advocates.

**Sponsoring Organizations:** The Chicago Bar Association and The Women's Bar Association of Illinois

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